Case 17-36049 Doc 1 Filed 12/04/17 Entered 12/04/17 16:03:49 Desc Main Document Page 1 of 66 United States Bankruptcy Court

Northern District of Illinois, Eastern Division

Mora, Jose Chapter 13

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

Number of Creditors 49

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: December 4, 2017 /s/ Jose Mora

Debtor

Joint Debtor

5th 3rd BAnk 5050 Kingsley Dr Cincinnati, OH 45227-1115

American Eagle 536 Randall Rd South Elgin, IL 60177-3315

Bk of Amer PO Box 982238 El Paso, TX 79998-2238

Bk of America PO Box 982238 El Paso, TX 79998-2238

Capital One Auto 3901 Dallas Pkwy Plano, TX 75093-7864

Chase Card PO Box 15298 Wilmington, DE 19850-5298

Chase Mortgage PO Box 24696 Columbus, OH 43224-0696 Chld/CBNA PO Box 6497 Sioux Falls, SD 57117-6497

Choice Recovery 1550 Old Henderson Rd Columbus, OH 43220-3626

CITI PO Box 6241 Sioux Falls, SD 57117-6241

CITIBANK
PO Box 769006
San Antonio, TX 78245-9006

Citibbank PO Box 76906 San Antonio, TX 78245

COMENITY BANK 3100 Easton Square Pl Columbus, OH 43219-6232

COMENITY BANK PO Box 182789 Columbus, OH 43218-2789 Community Bank 3100 Easton Square Pl Columbus, OH 43219-6232

DITECH FINANCIAL 332 Minnesota St Ste 610 Saint Paul, MN 55101-7707

DSNB MACYS 9111 Duke Blvd Mason, OH 45040-8999

ETHICON SUTURE CREDIT UNION 5235 W 65th St Unit C Chicago, IL 60638-5700

Ethicon Suture Credit Union 5235 W 65th St Chicago, IL 60638-5700

Fifth Third Bank 5050 Kingsley Dr Cincinnati, OH 45227-1115

Gottlieb Hospital 701 W North Ave Melrose Park, IL 60160-1612 Illinois Department of Revenue PO Box 19035 Springfield, IL 62794-9035

Internal Revenue Service Centralized Insolvency Operation Philadelphia, PA 19114-0326

KOHLS N56 W 17000 RIDGEWOOD DR MENOMONEE FALLS, WI 53051

Kohls N6 W 1700 Ridgewood Dr Menomonee Falls, WI 53050

Loan Care Servicing Ctr 3637 Sentara Way Virginia Beach, VA 23452-4262

LOANCARE SERVICING CTR 3637 Sentara Way Virginia Beach, VA 23452-4262

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068-1331 Medicredit, Inc PO Box 1629 Maryland Heights, MO 63043-0629

Mr. Cooper 8950 Cypress Waters Blvd Dallas, TX 60160

MWSTRN FINCL 8100 W 159th St Orland Park, IL 60462-4939

Prosper Marketrplace 101 2nd St Fl 16 San Francisco, CA 94105-3672

Sears
PO Box 6283
Sioux Falls, SD 57117-6283

Sears PO Box 6282 Sioux Falls, SD 57117-6282

Sears
PO Box 6189
Sioux Falls, SD 57117-6189

SEARS/CBNA
PO Box 6283
Sioux Falls, SD 57117-6283

SEBECA MORTGAGE 611 Jamison Rd Ste 7312 Elma, NY 14059-9392

SPRINGLEAF FINANCIAL 3519 W Lake St Melrose Park, IL 60160-2825

SPRINT PO Box 4191 Carol Stream, IL 60197-4191

Sprint 3519 W Lake St Melrose Park, IL 60160-2825

Sync/home Design PO Box 965036 Orlando, FL 32896-5036

Syncb/sears PO Box 6153 Rapid City, SD 57709-6153 SYNOB/HOME DESIGN PO Box 965036 Orlando, FL 32896-5036

Target
PO Box 673
Minneapolis, MN 55440-0673

TD BANK
PO Box 673
Minneapolis, MN 55440-0673

TD Bank Target PO Box 6153 Rapid City, SD 57709-6153

TFDS
PO Box 1697
Winterville, NC 28590-1697

THD/CBNA
PO Box 6497
Sioux Falls, SD 57117-6497

TRANSWORLD SYS 507 Prudential Rd Horsham, PA 19044-2308 $_{B201B\;(Form\;2018)}Case_{2/19}7\text{-36049}$

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Signature of Joint Debtor (if any)

Desc Main

Date

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Northern District of Illinois, Eastern Division

| IN RE: | Case No |
|------------|--|
| Mora, Jose | Chapter 13 |
| Debtor(s) | • |
| | F NOTICE TO CONSUMER DEBTOR(S) b) OF THE BANKRUPTCY CODE |

| UNDER § | 342(b) OF THE BANKRUPTCY COL |)E |
|--|--|--|
| Certificate of | [Non-Attorney] Bankruptcy Petition Pr | reparer |
| I, the [non-attorney] bankruptcy petition preparer notice, as required by § 342(b) of the Bankruptcy | | hat I delivered to the debtor the attached |
| Printed Name and title, if any, of Bankruptcy Pet Address: | pet the pri: | cial Security number (If the bankruptcy ition preparer is not an individual, state Social Security number of the officer, ncipal, responsible person, or partner of bankruptcy petition preparer.) |
| x | | equired by 11 U.S.C. § 110.) |
| Signature of Bankruptcy Petition Preparer of offi partner whose Social Security number is provided | | |
| | Certificate of the Debtor | |
| I (We), the debtor(s), affirm that I (we) have rece | ived and read the attached notice, as required | by § 342(b) of the Bankruptcy Code. |
| Mora, Jose | X /s/ Jose Mora | 12/04/2017 |
| Printed Name(s) of Debtor(s) | Signature of Debtor | Date |
| Case No. (if known) | X | |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Identify Yourself | | |
|----|---|--|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on | Jose | |
| | your government-issued picture identification (for example, your driver's | First name | First name |
| | license or passport). | Middle name | Middle name |
| | Bring your picture | Mora | |
| | identification to your meetin with the trustee. | G Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | | |
| 2. | All other names you have used in the last 8 years | | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-4891 | |
| | | | |

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Debtor 1 Mora, Jose

| | | About Dakton da | About Dobton 2 (Chause Only in a Joint Coas) | | |
|--|---|---|--|--|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | |
| Include trade names and doing business as names | | Business name(s) | Business name(s) | | |
| | | EINs | EINs | | |
| 5. | Where you live | 1304 N 16th Ave | If Debtor 2 lives at a different address: | | |
| | | Melrose Park, IL 60160-3334 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | · | Trained, ease, eny, etate a 211 esse | | |
| | | Cook County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |

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| Par | Tell the Court About Y | our Bank | ruptcy Ca | se | | | | |
|--|---|----------|--------------------------------|--|------------------------------|--|--|----------------------------------|
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | lso, go to tl | rief description of each, see N he top of page 1 and check the | | | § 342(b) for Individuals | s Filing for Bankruptcy (Form |
| | | ☐ Chap | | | | | | |
| | | ☐ Chap | | | | | | |
| | | ` | | | | | | |
| | | ■ Chap | ner 13 | | | | | |
| 8. How you will pay the fee I will pay the entire fee when I file my petition about how you may pay. Typically, if you are paying lf your attorney is submitting your payment on you pre-printed address. | | | | paying the | e fee yourself, you | may pay with cash, cas | shier's check, or money order | |
| | | | | the fee in installments. If your stallments (Official Form 103 | | this option, sign a | nd attach the Application | on for Individuals to Pay The |
| | | | J | t my fee be waived (You may | , | his option only if y | ou are filing for Chapter | 7. By law, a judge may, but is |
| | | nc yo | t required to ur family siz | o, waive your fee, and may do ze and you are unable to pay th Chapter 7 Filing Fee Waived (C | so only if y ne fee in in | our income is less stallments). If you | than 150% of the offic choose this option, you | ial poverty line that applies to |
| 9. Have you filed for No. bankruptcy within the last | | | | | | | | |
| | 8 years? | ■ Yes. | District | Northern District of | When | 8/20/06 | Case number | 16-27402 |
| | | | District | Illinois | - When | 0/20/00 | Case number | 10 21 402 |
| | | | District | | - When | | Case number | |
| | | | District | - | | | OddC Humber | |
| 10. | Are any bankruptcy cases pending or being filed by | ■ No | | | | | | |
| | a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | |
| | | | Debtor | | | | Relationship to y | ou |
| | | | District | | _ When | | Case number, if I | known |
| | | | Debtor | | | | Relationship to y | ou |
| | | | District | | _ When | | Case number, if I | known |
| 11. | Do you rent your | ■ No. | Go to I | ine 12. | | | | |
| | residence? | ☐ Yes. | Has yo | our landlord obtained an evicti | on judgme | ent against you? | | |
| | | | | No. Go to line 12. | | | | |
| | | | | Yes. Fill out <i>Initial Statement</i> bankruptcy petition. | About an | Eviction Judgmen | t Against You (Form 10 | 11A) and file it with this |

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Page 13 of 66 Case number (if known) Document Debtor 1 Mora, Jose Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate 13. Are you filing under Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 you a small business U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

Do you own or have any property that poses or is alleged to pose a threat of Yes. imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

| INO. | |
|------|--|
| | |

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1

Part 5:

Mora, Jose

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:

П Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Page 15 of 66 Case number (if known) Document Debtor 1 Mora, Jose **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. ■ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that after I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are ☐ Yes. any exempt property is paid that funds will be available to distribute to unsecured creditors? excluded and administrative expenses ☐ No are paid that funds will be ☐ Yes available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10.000 5**0,001-100,000 50-99 owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100.001 - \$500.000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities to □ \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jose Mora Signature of Debtor 2 Jose Mora Signature of Debtor 1

Executed on

December 4, 2017 MM / DD / YYYY

Executed on

MM / DD / YYYY

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Document Debtor 1 Mora, Jose

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /S/ Steven Leany | Date | December 4, 2017 |
|--|---------------|--------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Steven Leahy | | |
| Printed name | | |
| Law Office Steven A Leahy, PC | | |
| Firm name | | |
| | | |
| 150 North Michigan Ave Suite 1120 | | |
| Chicago, IL 60601 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (312) 664-6649 | Email address | cincompass@it-lawyer.com |
| (312) 004-0043 | | cincompass@it-lawyer.com |
| 6273453 | | |
| Bar number & State | _ | |

Case 17-36049 Doc 1 Filed 12/04/17 Entered 12/04/17 16:03:49 Desc Main Document Page 17 of 66 Fill in this information to identify your case and this filing: Debtor 1 Jose Mora Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Do not deduct secured claims or exemptions. Put 1304 N 16th Ave the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Street address, if available, or other description Condominium or cooperative Manufactured or mobile home Current value of the Current value of the **Melrose Park** 60160-3334 IL Land entire property? portion you own? City State ZIP Code Investment property \$0.00 \$0.00

Timeshare Describe the nature of your ownership interest ☐ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one **Fee Simple** Debtor 1 only Cook Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number:

Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages
you have attached for Part 1. Write that number here......=>

\$0.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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| Debt | or 1 Mor | a, Jose | | ase number (if known) | |
|---------------|---------------|---|--|-----------------------|---|
| 3. C a | rs, vans, tru | icks, tractors, sport utility ve | hicles, motorcycles | | |
| | No | | | | |
| _ | Yes | | | | |
| | | | | | |
| 3.1 | Make: | GMC | Who has an interest in the property? Check one | | claims or exemptions. Put red claims on Schedule D: |
| | Model: | Envoy | Debtor 1 only | | aims Secured by Property. |
| | Year: | 2004 | ☐ Debtor 2 only | Current value of the | Current value of the |
| | Approximate | | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | Other inform | nation: | ☐ At least one of the debtors and another | | |
| | | | ☐ Check if this is community property (see instructions) | \$2,367.00 | \$2,367.00 |
| 3.2 | Make: | Ford | Who has an interest in the property? Check one | | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| | Model: | F-150 | Debtor 1 only | | aims Secured by Property. |
| | _ | 2006 | ☐ Debtor 2 only | Current value of the | Current value of the |
| | Approximate | | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | Other inform | nation: | At least one of the debtors and another | | |
| | | | ☐ Check if this is community property (see instructions) | \$2,861.00 | \$2,861.00 |
| | | | n for all of your entries from Part 2, including any | | \$5,228.00 |
| Part 3 | Describe ' | Your Personal and Household It | rems | | |
| | | | terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| <i>E.</i> | | ods and furnishings for appliances, furniture, linens, | china, kitchenware | | |
| _ | TCS. DCSCI | Stove/refrigera | itor | | \$450.00 |
| | | washer/dryer | | | \$250.00 |
| | | microwave | | | \$50.00 |
| | | cooking utens | ils | | \$60.00 |
| | | silverware | | | \$135.00 |
| | | cookware | | | \$120.00 |
| | | Living&dining | room furniture | | \$385.00 |
| | | tables & chairs | | | \$145.00 |

\$260.00

televisions

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Case number (if known) Document Debtor 1 Mora, Jose DVD/VCR \$100.00 bedroom furniture \$160.00 \$145.00 lamps & accessories Computer equipment \$290.00 \$360.00 tools carpeterns & Merchanics cell phones \$380.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ■ No ☐ Yes. Describe..... 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for \$3,290.00 Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Page 20 of 66
Case number (if known) Document Debtor 1 Mora, Jose 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Chase Bank 871156696 1836 N. Broadway **Checking Account** unknown Melrose Park, IL 60165 **Andigo Credit Union** 1501 Woodfield Rd. \$226.28 17.2. Checking Account Schamburg, IL 60173 Chase Bank 2734554450 \$47.02 **Savings Account** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Institution name: Type of account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

Case 17-36049

Doc 1

Filed 12/04/17

Entered 12/04/17 16:03:49

Desc Main

| De | ebtor 1 | Case 17-36049 Mora, Jose | Doc 1 | Filed 12/04/17 Document | Entered 12/04/17 16:03:49 Page 21 of 66 Case number (if known) | Desc Main |
|-----|---------------------|---|---------------------------------|----------------------------|--|---|
| | □ Yes. | Give specific information ab | out them | | | |
| 26. | Patents Examp ■ No | s, copyrights, trademarks, oles: Internet domain names, Give specific information ab | trade secrets websites, prod | | | |
| 27. | Examp ■ No | es, franchises, and other goles: Building permits, exclusions Give specific information at | ve licenses, c | | oldings, liquor licenses, professional licenses | |
| M | oney or | property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | ■ No | unds owed to you Give specific information abo | ut them, inclu | ding whether you alread | y filed the returns and the tax years | |
| 29. | ■ No | | ilimony, spous | sal support, child suppo | rt, maintenance, divorce settlement, property s | settlement |
| 30. | Examp | imounts someone owes youles: Unpaid wages, disability unpaid loans you made. Give specific information | insurance pag | | s, sick pay, vacation pay, workers' compensati | ion, Social Security benefits; |
| 31. | Examp ■ No | | | | SA); credit, homeowner's, or renter's insurance | |
| | ⊔ Yes. | Name the insurance compan Comp | y of each polic pany name: | cy and list its value. | Beneficiary: | Surrender or refund value: |
| 32. | If you a died. | erest in property that is duare the beneficiary of a living to | | | I rance policy, or are currently entitled to receive p | property because someone has |
| 33. | Examp ■ No | oles: Accidents, employment | | | or made a demand for payment to sue | |
| 24 | | Describe each claim | d alaima af a | | accompany of the debter and vigitor to | at off plaims |
| 34. | ■ No | Describe each claim | u ciaims or e | very nature, including | counterclaims of the debtor and rights to s | et on cialins |
| 35. | | ancial assets you did not a | already list | | | |
| | ■ No □ Yes. | Give specific information | | | | |
| 36 | | | | | y entries for pages you have attached for | \$273.30 |

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

| Debt | or 1 | Mora, Jose | Docume | nt —— | Page 22 of | 66 Case number (if known) | |
|---------------|---------|---|-----------------------|----------|----------------------|------------------------------|------------------------|
| 37 D o | o vou c | own or have any legal or equitable intere | st in any business-re | elated n | roperty? | | |
| _ | - | to Part 6. | u, buo | riaioa p | . оролу . | | |
| | | Go to line 38. | | | | | |
| | | | | | | | |
| Part (| | scribe Any Farm- and Commercial Fishi ou own or have an interest in farmland, list | | You Ow | n or Have an Interes | t In. | |
| 46. D | o you | own or have any legal or equitable | interest in any far | m- or c | ommercial fishing | -related property? | |
| I | No. | Go to Part 7. | | | _ | | |
| I | ☐ Yes | . Go to line 47. | | | | | |
| | | | | | | | |
| Part 7 | 7: | Describe All Property You Own or Have | e an Interest in That | You Die | d Not List Above | | |
| ı | Examp | have other property of any kind yo les: Season tickets, country club men | | ist? | | | |
| | No | | | | | | |
| Ц | Yes. | Give specific information | | | | | |
| 54 | Add t | he dollar value of all of your entries | from Part 7. Write | that n | ımber here | | \$0.00 |
| ٠ | | | | | | | Ψ0.00 |
| Part 8 | B: | List the Totals of Each Part of this Forn | 1 | | | | |
| 55. | Part 1 | I: Total real estate, line 2 | | | | | \$0.00 |
| 56. | Part 2 | 2: Total vehicles, line 5 | | | \$5,228.00 | | |
| 57. | Part 3 | 3: Total personal and household iter | ns, line 15 | | \$3,290.00 | | |
| 58. | Part 4 | 1: Total financial assets, line 36 | | | \$273.30 | | |
| 59. | Part 5 | 5: Total business-related property, li | ne 45 | _ | \$0.00 | | |
| 60. | Part 6 | 6: Total farm- and fishing-related pro | perty, line 52 | _ | \$0.00 | | |
| 61. | Part 7 | 7: Total other property not listed, lin | e 54 | + _ | \$0.00 | | |
| 62. | Total | personal property. Add lines 56 thro | ugh 61 | _ | \$8,791.30 | Copy personal property to | stal \$8,791.30 |
| 63. | Total | of all property on Schedule A/B. Ad | d line 55 + line 62 | | | | \$8,791.30 |

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Official Form 106A/B Schedule A/B: Property page 6

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| | | 17(7) | | | |
|---------------------|--------------------------|-------------------|----------------------------|-----|---------------------|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Jose Mora | | | | |
| | First Name | Middle Name | Last Name |) | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVIS | ION | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an |
| | | | | | amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| | Identify the Property You Claim as Exe | ame |
|--|--|-----|
|--|--|-----|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
|--|---|-----------------------------------|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| 1304 N 16th Ave | \$0.00 | | | 735 ILCS 5/12-901 |
| Melrose Park IL, 60160-3334 County : Cook | | | 100% of fair market value, up to any applicable statutory limit | |
| GMC Envoy | \$2,367.00 | | | 735 ILCS 5/12-1001(c) |
| 2004 89000 Line from <i>Schedule A/B</i> : 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Stove/refrigerator Line from Schedule A/B 6.1 | \$450.00 | | | 735 ILCS 5/12-1001(b) |
| Line from Scriedule A/B. 0.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| washer/dryer Line from Schedule A/B 6.2 | \$250.00 | | | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B. 0.2 | | • | 100% of fair market value, up to any applicable statutory limit | |
| microwave | \$50.00 | | | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.3 | | - | 100% of fair market value, up to any applicable statutory limit | |

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| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|--|---|---|------------------------------------|
| | Schedule A/B | Chock only one box for each exemption. | 705 00 5/40 4004/) |
| cooking utensils Line from Schedule A/B: 6.4 | \$60.00 | | 735 ILCS 5/12-1001(b) |
| | | ■ 100% of fair market value, up to any applicable statutory limit | |
| silverware Line from Schedule A/B 6.5 | \$135.00 | | 735 ILCS 5/12-1001(b) |
| Line from Scriedule A/B. 6.3 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| cookware | \$120.00 | | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.6 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| Living&dining room furniture | \$385.00 | | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.7 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| tables & chairs | \$145.00 | | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.8 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| televisions | \$260.00 | | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.9 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| DVD/VCR | \$100.00 | | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.10 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| bedroom furniture | \$160.00 | | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.11 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| lamps & accessories Line from Schedule A/B 6.12 | \$145.00 | | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B. G. 12 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| Computer equipment Line from Schedule A/B 6.13 | \$290.00 | | 735 ILCS 5/12-1001(b) |
| LINE HOTH SCHEUWE A/B. 0.13 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| tools carpeterns & Merchanics Line from Schedule A/B 6.14 | \$360.00 | | 735 ILCS 5/12-1001(b) |
| Line nom <i>Scriedule A/B</i> . 0.14 | | ■ 100% of fair market value, up to any applicable statutory limit | |
| cell phones | \$380.00 | | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.15 | | 100% of fair market value, up to any applicable statutory limit | - |

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| Brief description of the property and line on Schedule A/B that lists this property | Current value of the Amount of the exemption you claim portion you own | | Specific laws that allow exemption | |
|---|--|---|------------------------------------|--|
| | Copy the value from Schedule A/B | Check only one box for each exemption. | | |
| Chase Bank 871156696 1836 N. Broadway Melrose Park, IL 60165 Line from Schedule A/B 17.1 | Unknown | ■ 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | |
| Andigo Credit Union 1501 Woodfield Rd. Schamburg, IL 60173 Line from Schedule A/B 17.2 | \$226.28 | ■ 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | |
| Chase Bank 2734554450 Line from Schedule A/B 17.3 | \$47.02 | □ | 735 ILCS 5/12-1001(b) | |

Official Form 106C

No

Yes

| Case 17-36049 | | ed 12/04/17 16: 26 of 66 | 03:49 Desc N | nam |
|---|---|--------------------------------------|--|-------------------------------|
| Fill in this information to identify yo | | | | |
| Debtor 1 Jose Mora | | | | |
| First Name | Middle Name Last Name | | • } | |
| Debtor 2 (Spouse if, filing) First Name | Middle Name Last Name | | - | |
| | NORTHERN DISTRICT OF HEIMORS FAS | STEDNI DIVICIONI | | |
| United States Bankruptcy Court for the | NORTHERN DISTRICT OF ILLINOIS, EAS | STERN DIVISION | - | |
| Case number | | | | |
| (if known) | | | _ | t if this is an ded filing |
| | | | amend | ded illing |
| Official Form 106D | | | | |
| Schedule D: Creditor: | s Who Have Claims Secure | ed by Propert | V | 12/15 |
| | | <u> </u> | <u>,</u> | |
| | If two married people are filing together, both are e ut, number the entries, and attach it to this form. On | | | |
| 1. Do any creditors have claims secured b | y your property? | | | |
| \square No. Check this box and submit t | his form to the court with your other schedules. Yo | ou have nothing else to re | port on this form. | |
| ■ Yes. Fill in all of the information | below. | | | |
| Part 1: List All Secured Claims | | | | |
| | more than one secured claim, list the creditor separate | lv Column A | Column B | Column C |
| for each claim. If more than one creditor ha | s a particular claim, list the other creditors in Part 2. As tical order according to the creditor 's name. | | Value of collateral that supports this | Unsecured portion |
| 2.4 Mr. Cooper | Describe the property that secures the claim: | value of collateral. \$245.000.00 | claim \$160,000,00 | If any \$85.000.00 |
| 2.1 Mr. Cooper Creditor's Name | | \$245,000.00 | \$160,000.00 | \$65,000.00 |
| Orealion s Name | 1304 N 16th Ave, Melrose Park, IL 60160-3334 | | | |
| 8950 Cypress Waters | As of the date you file, the claim is: Check all that | | | |
| Blvd Dallas, TX 60160 | apply. Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| , , , | Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | An agreement you made (such as mortgage or s | secured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number 5205 | 5 | | |
| | | | | |
| | | \$24F 000 | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$245,000.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$245,000.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | Case 17 00040 B | Document I | Page 27 of 66 | 70.45 Descrivant |
|--|---|--|---|--|
| Fill in this i | nformation to identify your ca | | | |
| Debtor 1 | Jose Mora | | | |
| Debior | First Name | Middle Name | Last Name | } |
| Debtor 2 | | | | |
| (Spouse if, filing |) First Name | Middle Name | Last Name | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLIN | IOIS, EASTERN DIVISION | |
| Case number | er | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Official F | orm 106E/F | | | |
| | | o Have Unsecured C | laime | 12/15 |
| | | | | ONPRIORITY claims. List the other party to |
| D: Creditors V the Continuat case number | Who Have Claims Secured by Propion Page to this page. If you have | perty. If more space is needed, copy no information to report in a Part, d | the Part you need, fill it out, number | y secured claims that are listed in Schedul the entries in the boxes on the left. Attach additional pages, write your name and |
| | reditors have priority unsecured | | | |
| | to to Part 2. | | | |
| ☐ Yes. | o to r art z. | | | |
| | ist All of Your NONPRIORITY | Unsecured Claims | | |
| | reditors have nonpriority unsecu | | | |
| ' | | . Submit this form to the court with you | ır other schedules | |
| | ou have nothing to report in this part | . Odbinit and form to the court war you | Total soriedales. | |
| Yes. | | | | |
| unsecure | d claim, list the creditor separately for | or each claim. For each claim listed, ide | | ditor has more than one nonpriority claims already included in Part 1. If more I claims fill out the Continuation Page of Part |
| | | | | Total claim |
| 4.1 5th | 3rd BAnk | Last 4 digits of accour | nt number | unknown |
| | priority Creditor's Name | Million and a fall of | | |
| 505 | 60 Kingsley Dr | When was the debt inc | curred? | |
| | cinnati, OH 45227-1115 | | | |
| | ber Street City State Zlp Code | As of the date you file | , the claim is: Check all that apply | |
| Who | incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and anoth | _ | f unsecured claim: | |
| | Check if this claim is for a commu | | | |
| debi | t le claim subject to offset? | Obligations arising of comparisons of the comparison of the compar | out of a separation agreement or divorce | e that you did not |
| | • | | profit-sharing plans, and other similar d | ebts |
| · | | Other Specify | r | |
| LI Y | 162 | ()ther Specify | | |

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Case number (f know)

| Miora, Jose | Odde Humber (I know) | |
|---|---|------------|
| American Eagle | Last 4 digits of account number | \$0.00 |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| 536 Randall Rd | | |
| South Elgin, IL 60177-3315 Number Street City State Zlp Code | | |
| Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 2 only Debtor 1 and Debtor 2 only | · | |
| | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | Student loans | |
| ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| Bk of Amer | Last 4 digits of account number 5423 | \$3,649.00 |
| Nonpriority Creditor's Name | When we she debt incorred? 2000 00 | |
| PO Box 982238 | When was the debt incurred? 2008-06 | |
| El Paso, TX 79998-2238 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Revolving account | |
| Bk of America | Last 4 digits of account number | \$0.00 |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| PO Box 982238 | | |
| El Paso, TX 79998-2238 | _ | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| □Yes | · · · · · · · · · · · · · · · · · · · | |
| □ 163 | Other. Specify | |

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| Capital One Auto Nonpriority Creditor's Name | Last 4 digits of account number | \$0.00 |
|---|--|----------------------|
| Nonpriority Creditor's Name | | Ψ0.00 |
| rionphoniy Groundr's riams | When was the debt incurred? | |
| 3901 Dallas Pkwy | Then was the dest mounted. | |
| Plano, TX 75093-7864 | | |
| | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| | <u> </u> | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| Chase Card | Last 4 digits of account number 3742 | \$305.00 |
| Nonpriority Creditor's Name | | ψ303.00 |
| | When was the debt incurred? 2007-11-02 | |
| | | |
| Wilmington, DE 19850-5298 Number Street City State 7In Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the dam is. Officer an that apply | |
| Debtor 1 only | Contingent | |
| ′ | - | |
| | | |
| | • | |
| | <u></u> | |
| | _ **** | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other Specify Revolving account | |
| | - Other. Openly | |
| Chase Mortgage | Last 4 digits of account number | \$0.00 |
| Nonpriority Creditor's Name | When was the deht incurred? | |
| PO Box 24696 | | |
| Columbus, OH 43224-0696 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| \square Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| • | <u></u> | |
| | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other, Specify | |
| | Plano, TX 75093-7864 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Chase Card Nonpriority Creditor's Name PO Box 15298 Wilmington, DE 19850-5298 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Chase Mortgage Nonpriority Creditor's Name PO Box 24696 Columbus, OH 43224-0696 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset? No Chase Mortgage Nonpriority Creditor's Name PO Box 24696 Columbus, OH 43224-0696 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No | Plano, TX 75093-7864 |

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Debtor 1 Mora, Jose Case number (if know) 4.8 Chld/CBNA Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? PO Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.9 Choice Recovery Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? 1550 Old Henderson Rd Columbus, OH 43220-3626 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.10 **Choice Recovery** Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? 1550 Old Henderson Rd Columbus, OH 43220-3626 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor 1 Mora, Jose Case number (if know) 4.11 cITI Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? PO Box 6241 Sioux Falls, SD 57117-6241 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.12 **CITIBANK** Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? PO Box 769006 San Antonio, TX 78245-9006 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.13 Citibbank Last 4 digits of account number 4626 \$10,609.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 76906 San Antonio, TX 78245 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Mora, Jose Case number (if know) 4.14 **COMENITY BANK** Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? 3100 Easton Square PI Columbus, OH 43219-6232 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.15 **COMENITY BANK** Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? PO Box 182789 Columbus, OH 43218-2789 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.16 **Community Bank** Last 4 digits of account number 9332 unknown Nonpriority Creditor's Name When was the debt incurred? 3100 Easton Square Pl Columbus, OH 43219-6232 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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| Deblo | Mora, Jose | Case number (it know) | |
|-------|--|---|---------|
| 4.17 | DITECH FINANCIAL | Last 4 digits of account number | unknown |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 332 Minnesota St Ste 610 Saint Paul, MN 55101-7707 | When was the dept incurred: | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | _ | |
| | in res | Other. Specify | |
| 4.18 | DSNB Macys | Last 4 digits of account number 7998 | unknown |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 9111 Duke Blvd | | |
| | Mason, OH 45040-8999 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | Пол | |
| | <u> </u> | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |
| | | | |
| 4.19 | DSNB MACYS | Last 4 digits of account number | unknown |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 9111 Duke Blvd | | |
| | Mason, OH 45040-8999 | _ | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |

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Debtor 1 Mora, Jose 4.20 **Elmhurst Anesthesia** \$65.00 Last 4 digits of account number 0116 Nonpriority Creditor's Name When was the debt incurred? 2017-05 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Open account 4.21 Last 4 digits of account number \$6,509.88 **Ethicon Suture Credit Union** 5563 Nonpriority Creditor's Name When was the debt incurred? 5235 W 65th St Chicago, IL 60638-5700 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.22 **ETHICON SUTURE CREDIT UNION** Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? 5235 W 65th St Unit C Chicago, IL 60638-5700 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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Case number (f know)

| Fifth Third Bank | Last 4 digits of account number | \$0.00 |
|--|---|----------|
| Nonpriority Creditor's Name | | Ψ0.00 |
| | When was the debt incurred? | |
| 5050 Kingsley Dr | | |
| Cincinnati, OH 45227-1115 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| Gottlieb Hospital | Last 4 digits of account number 9252 | \$110.00 |
| Nonpriority Creditor's Name | | |
| 701 W North Ave | When was the debt incurred? 2017-05 | |
| Melrose Park, IL 60160-1612 | | |
| Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Open account | |
| Gottlieb Hospital | Last 4 digits of account number 2175 | \$108.00 |
| Nonpriority Creditor's Name | | |
| 701 W North Ave | When was the debt incurred? 2017-03 | |
| Melrose Park, IL 60160-1612 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Open account | |

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| Mora, Jose | | Case number (if know) | |
|--|--|--|------------|
| Gottlieb Hospital | Last 4 digits of account number | 3405 | \$27.00 |
| Nonpriority Creditor's Name | When was the debt incurred? | 2017-04 | |
| 701 W North Ave | | | |
| Melrose Park, IL 60160-1612 Number Street City State Zlp Code | As of the date you file, the claim | s. Chack all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim | s. Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt | | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharing | | |
| Yes | Other. Specify Open acco | unt | |
| Illinois Department of Revenue | Last 4 digits of account number | | \$0.00 |
| Nonpriority Creditor's Name | When was the debt incurred? | | |
| PO Box 19035 | when was the dept incurred: | | |
| Springfield, IL 62794-9035 | _ | | |
| Number Street City State ZIp Code | As of the date you file, the claim | s: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | Lateta | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure ☐ Student loans | d claim: | |
| ☐ Check if this claim is for a community debt | _ | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | ration agreement of divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify | | |
| Illinois Department of Revenue | Last 4 digits of account number | | unknown |
| Nonpriority Creditor's Name | | | ulikilowii |
| DO D 10005 | When was the debt incurred? | | |
| PO Box 19035 Springfield, IL 62794-9035 | | | |
| Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharir | g plans, and other similar debts | |
| ■ No | · | 5 F | |
| □ res | Other. Specify | | |

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| Debio | Mora, Jose | Case number (it know) | |
|-------|--|---|---------|
| 4.29 | Internal Revenue Service | Last 4 digits of account number | unknown |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | Centralized Insolvency Operation Philadelphia, PA 19114-0326 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □ Yes | <u> </u> | |
| | Li les | Other. Specify | |
| 4.30 | Kohls | Last 4 digits of account number | \$0.00 |
| | Nonpriority Creditor's Name | | |
| | N6 W 1700 Ridgewood Dr | When was the debt incurred? | |
| | Menomonee Falls, WI 53050 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | lacksquare Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.31 | KOHLS | Last 4 digits of account number | unknown |
| | Nonpriority Creditor's Name | | |
| | N56 W 17000 RIDGEWOOD DR | When was the debt incurred? | |
| | MENOMONEE FALLS, WI 53051 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other, Specify | |

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| Mora, Jose | Case number (if know) | |
|---|---|---------|
| Loan Care Servicing Ctr | Last 4 digits of account number 8147 | unknown |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| 3637 Sentara Way | | |
| Virginia Beach, VA 23452-4262 | <u>_</u> | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | _ | |
| Debtor 1 only | Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | _ | |
| Yes | Other. Specify | |
| LOANCARE SERVICING CTR | Last 4 digits of account number | unknown |
| Nonpriority Creditor's Name | | |
| 2027 Contone West | When was the debt incurred? | |
| 3637 Sentara Way Virginia Beach, VA 23452-4262 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify | |
| | | |
| MWSTRN FINCL | Last 4 digits of account number | unknown |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| 8100 W 159th St | | |
| Orland Park, IL 60462-4939 | _ | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify | |

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Case number (f know)

Debtor 1 Mora, Jose 4.35 \$23,433.00 **Prosper Marketrplace** Last 4 digits of account number 1019 Nonpriority Creditor's Name When was the debt incurred? 07/16 101 2nd St FI 16 San Francisco, CA 94105-3672 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.36 Last 4 digits of account number \$101.00 Sears Nonpriority Creditor's Name When was the debt incurred? PO Box 6283 Sioux Falls, SD 57117-6283 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify credit card 4.37 Last 4 digits of account number 1446 \$820.00 Sears Nonpriority Creditor's Name When was the debt incurred? PO Box 6282 Sioux Falls, SD 57117-6282 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Case number (f know)

Debtor 1 Mora, Jose 4.38 Last 4 digits of account number \$2,496.00 Sears 9300 Nonpriority Creditor's Name When was the debt incurred? PO Box 6189 Sioux Falls, SD 57117-6189 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify credit card ☐ Yes 4.39 SEARS/CBNA Last 4 digits of account number \$0.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 6283 Sioux Falls, SD 57117-6283 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.40 **SEBECA MORTGAGE** Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? 611 Jamison Rd Ste 7312 Elma, NY 14059-9392 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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| Mora, Jose | Case number (it know) | |
|--|---|---------------------|
| SPRINGLEAF FINANCIAL | Last 4 digits of account number | unknown |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| 3519 W Lake St | | |
| Melrose Park, IL 60160-2825 | | |
| Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | <u>_</u> | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | <u> </u> | |
| ☐ Yes | Other. Specify | |
| Sprint | Last 4 digits of account number 7161 | \$2,618.14 |
| Nonpriority Creditor's Name | - | +-,01011 |
| 2540 W.L. alea Ct | When was the debt incurred? | |
| 3519 W Lake St Melrose Park, IL 60160-2825 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Utility | |
| SPRINT | Last 4 digits of account number | unknown |
| Nonpriority Creditor's Name | | GIRIIOWII |
| | When was the debt incurred? | |
| PO Box 4191 | | |
| Carol Stream, IL 60197-4191 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | Ac of the date you me, the stannie. Onesk an that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| ☐Yes | Other. Specify | |
| | | |

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Debtor 1 Mora, Jose Case number (if know) 4.44 Sync/home Design Last 4 digits of account number 1740 unknown Nonpriority Creditor's Name When was the debt incurred? PO Box 965036 Orlando, FL 32896-5036 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.45 Syncb/sears Last 4 digits of account number 3239 \$0.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 6153 Rapid City, SD 57709-6153 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.46 SYNCB/SEARS Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? PO Box 6153 Rapid City, SD 57709-6153 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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| Debic | Mora, Jose | Case number (it know) | |
|-------|---|--|------------|
| 4.47 | SYNOB/HOME DESIGN | Last 4 digits of account number | unknown |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | PO Box 965036 | Their was the dest incurred. | |
| | Orlando, FL 32896-5036 | _ | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not | |
| | - | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ■ No | | |
| | Yes | Other. Specify | |
| 4.48 | Target | Last 4 digits of account number 4153 | \$6,185.00 |
| | Nonpriority Creditor's Name | | |
| | PO Box 673 | When was the debt incurred? 08/03/2016 | |
| | Minneapolis, MN 55440-0673 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | \square Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.49 | TD BANK | Last 4 digits of account number | unknown |
| | Nonpriority Creditor's Name | | uniii unii |
| | DO D | When was the debt incurred? | |
| | PO Box 673 Minneapolis, MN 55440-0673 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other, Specify | |

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Debtor 1 Mora, Jose Case number (if know) 4.50 \$0.00 **TD Bank Target** Last 4 digits of account number 3239 Nonpriority Creditor's Name When was the debt incurred? PO Box 6153 Rapid City, SD 57709-6153 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.51 **TFDS** Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? PO Box 1697 Winterville, NC 28590-1697 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.52 THD/CBNA Last 4 digits of account number unknown Nonpriority Creditor's Name When was the debt incurred? PO Box 6497 Sioux Falls, SD 57117-6497 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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| Debioi | wora, Jos | se | | Case | number (it k | | | |
|--------------------|--------------------------------------|---------------------------------------|--|-------------------|----------------|---------------------------------|--|-------------------|
| | TRANSWO | | Last 4 digits of account number | er | | | | unknown |
| | rtonphonty orot | and o Hamo | When was the debt incurred? | | | | | |
| | 507 Pruden | | | | | | | |
| - | Horsham, F | PA 19044-2308 City State Zlp Code | As of the date you file, the clai | m is: Chec | k all that an | olv. | | |
| | | the debt? Check one. | As of the date you me, the old | III 13. Onco | k all that app | oly | | |
| | ■ Debtor 1 onl | | П 0 | | | | | |
| | | • | Contingent | | | | | |
| | Debtor 2 onl | • | ☐ Unliquidated | | | | | |
| | Debtor 1 and | · · · · · · · · · · · · · · · · · · · | ☐ Disputed Type of NONPRIORITY unsecu | rad alaimi | | | | |
| | | of the debtors and another | Student loans | ireu Ciaiiii. | | | | |
| | ☐ Check if thi debt | s claim is for a community | ☐ Obligations arising out of a se | noration a | aroomont or | diverse that you did a | not | |
| | | bject to offset? | report as priority claims | eparation a | Jieement of | divorce that you did i | 101 | |
| | ■ No | | Debts to pension or profit-sha | aring plans, | and other si | milar debts | | |
| | □Yes | | Other. Specify | | | | | |
| | — 103 | | - Other. Specify | | | | | |
| Part 3: | List Others | s to Re Notified About a De | ebt That You Already Listed | | | | | |
| | | | about your bankruptcy, for a debt tha | t vou alrea | dy listed in | Parts 1 or 2 For ev | ample if a | collection agency |
| is tryin have n | ng to collect fro nore than one c | m you for a debt you owe to s | someone else, list the original creditor nat you listed in Parts 1 or 2, list the ac | in Parts 1 | or 2, then li | st the collection ag | ency here. | Similarly, if you |
| Name an | d Address | | On which entry in Part 1 or Part 2 did y | | - | | | |
| | usi Bur | . | Line 4.20 of (<i>Check one</i>): | | | ith Priority Unsecured | | |
| | Renaissance ≀idge, IL 600 | | | Part 2: | Creditors w | ith Nonpriority Unsec | ured Claims | ; |
| raiki | ilage, iL ood | 700-1331 | Last 4 digits of account number | 0 | 116 | | | |
| Name an | d Address | | On which entry in Part 1 or Part 2 did y | ou list the | original credi | itor? | | |
| | redit, Inc | | Line 4.24 of (<i>Check one</i>): | Part 1: | Creditors w | ith Priority Unsecured | d Claims | |
| | x 1629 | NO 00040 0000 | | Part 2: | Creditors w | ith Nonpriority Unsec | ured Claims | ; |
| Maryia | ina Heights | , MO 63043-0629 | Last 4 digits of account number | o | 252 | | | |
| | | | | | | | | |
| | d Address | | On which entry in Part 1 or Part 2 did y | | • | | | |
| | redit, Inc x 1629 | | Line 4.25 of (<i>Check one</i>): | | | ith Priority Unsecured | | |
| _ | | , MO 63043-0629 | | Part 2: | Creditors w | ith Nonpriority Unsec | ured Claims | ; |
| | . | , | Last 4 digits of account number | 2 | 175 | | | |
| | | | 0 111 1 1 5 1 1 5 10 11 | P of | | | | |
| | d Address r edit, Inc | | On which entry in Part 1 or Part 2 did y Line 4.26 of (<i>Check one</i>): | | • | itor? ith Priority Unsecured | d Claims | |
| | x 1629 | | en (eneck ene). | | | ith Nonpriority Unsec | | |
| Maryla | ind Heights | , MO 63043-0629 | | — 1 an 2. | Creditors w | iti Nonphonty Onsec | urea Ciairis | • |
| | | | Last 4 digits of account number | 3 | 405 | | | |
| Dowt 4- | • A al al Ala a A a | warmta fan Faab Trosa af II | la a a a suma di Cilatina | | | | | |
| Part 4: | | mounts for Each Type of U | | | | | | |
| | he amounts of f unsecured cla | | aims. This information is for statistica | I reporting | purposes | only. 28 U.S.C. §159 | . Add the ai | mounts for each |
| | | | | | | Total Claim | | |
| | 6a. | Domestic support obligation | ns | 6a. | \$ | (| 0.00 | |
| Total cla | | Toyon and contain other lat | sto you owe the severe | C.L | | | | |
| from Pa | art 1 6b. 6c. | Taxes and certain other deb | ots you owe the government of injury while you were intoxicated | 6b. 6c. | \$ | | 0.00 | |
| | 6d. | | nsecured claims. Write that amount here | | \$ | | 0.00 0.00 | |
| | ou. | an onto priority u | and another the control of the contr | 54. | Ψ | | <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> | |
| | 6e. | Total Priority. Add lines 6a th | nrough 6d. | 6e. | \$ | |) 00 | |
| | 00. | . Jan Jing. / Not inico da ti | g va. | JC. | | | 0.00 | |
| | | | | | | Total Claim | | |
| | 6f | Student loans | | 6f | ¢ | | 00 | |

Total claims

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6j.

57,036.02

Page 46 of 66 Case number (f know) Debtor 1 Mora, Jose from Part 2 6g. Obligations arising out of a separation agreement or divorce that 0.00 6g. you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 6i. 57,036.02

Official Form 106 E/F

6j.

Total Nonpriority. Add lines 6f through 6i.

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| | | | III Paue 47 ULOO | |
|---------------------|--------------------------|-------------------|----------------------------|------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Jose Mora | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVIS | SION |
| Case number | | | | |
| (II KIIOWII) | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Number | whom you have the r, Street, City, State and ZIP | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| 0.0 | City | | State | ZIP Code | |
| 2.2 | | | | | <u> </u> |
| | Name | | | | |
| | Number | Street | | | _ |
| | | | | | |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | |
| | | | | | |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | _ |
| | | 0001 | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | <u> </u> |
| | Oity | | State | ZIF Code | |

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| | | Docume | nt <u>Pade 48 d</u> | IT hh | |
|---|---|--|--|---|---|
| Fill in this in | formation to identify your | | | | |
| Debtor 1 | Jose Mora | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United State | s Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTER | N DIVISION | |
| Case numbe | r | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| Official | Form 106H | | | | amended ming |
| | ıle H: Your Cod | ebtors | | | 12/15 |
| are filing tog and number case number | ether, both are equally resp | onsible for supplying co the left. Attach the Additi juestion. | rrect information. If mo onal Page to this page | ore space is needed, co . On the top of any Add | e as possible. If two married people py the Additional Page, fill it out, litional Pages, write your name and |
| | a nave any occupions. (ii) | od dre ming a joint odoe, de | That hat chire spease ac | a dodestor. | |
| ■ No □ Yes | | | | | |
| | n the last 8 years, have you a, Idaho, Louisiana, Nevada, | | | | states and territories include Arizona, |
| _ | o to line 3. Did your spouse, former spous | se, or legal equivalent live w | ith you at the time? | | |
| line 2 aç 106D), S Column | gain as a codebtor only if the schedule E/F (Official Form 2. | at person is a guarantor | or cosigner. Make sure | you have listed the cr e Schedule D, Schedul | with you. List the person shown in editor on Schedule D (Official Form e E/F, or Schedule G to fill out |
| | olumn 1: Your codebtor me, Number, Street, City, State and Z | IP Code | | Check all schedule | ditor to whom you owe the debt s that apply: |
| 3.1 | | | | ☐ Schedule D, line | e |
| | ame | | | □ Schedule E/F, li | ine |
| | | | | ☐ Schedule G, line | e |
| Nu Cit | imber Street ty | State | ZIP Code | _ | |
| 3.2 | | | | ☐ Schedule D, line | |
| | ame | | | Schedule E/F, li ☐ Schedule E/F, li ☐ Schedule G, line | ine |
| Nu | ımber Street | | | _ | |
| Cit | ty | State | ZIP Code | | |

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| | in this information to identify your ca | ise: | | | | | | | | |
|-------------|--|---------------------------------|--------------------------------------|-----------|-----------|--------------|------------|----------------------------|---------------------------------|------------|
| Del | btor 1 Jose Mora | | | | _ | | | | | |
| _ | btor 2 buse, if filing) | | | | _ | | | | | |
| Uni | ited States Bankruptcy Court for the: | NORTHERN DISTRIC | CT OF ILLINOIS, EAST | ERN | _ | | | | | |
| | se number | | _ | | | Check if | f this is: | | | |
| (lf kr | nown) | | | | | ☐ An a | | Ū | | |
| _ | (f) : 1 E | | | | | | | nt showing f the follow | g postpetition of ving date: | chapter 13 |
| | fficial Form 106l | | | | | MM | / DD/ Y | YYY | | |
| S | chedule I: Your Inco | ome | | | | | | | | 12/1 |
| spo atta | plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. Court 1: Describe Employment Fill in your employment | spouse is not filing wit | h you, do not include | informa | ation al | bout you | ır spous | se. If more | e space is ne | eded, |
| 1. | information. | | Debtor 1 | | | D | ebtor 2 | or non-fil | ling spouse | |
| | If you have more than one job, | Employment status | ■ Employed | | | | ☐ Emplo | yed | | |
| | attach a separate page with information about additional employers. | Occupation | ☐ Not employed | | | | ☐ Not er | mployed | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Newly Weds Foo | ds | | | | | | |
| | Occupation may include student o homemaker, if it applies. | _r Employer's address | 4140 W Fullerton Chicago, IL 6063 | | 6 | | | | | |
| | | How long employed th | nere? <u>18 years</u> | | | | _ | | | |
| Pai | rt 2: Give Details About Mon | thly Income | | | | | | | | |
| | mate monthly income as of the da ss you are separated. | te you file this form. If y | ou have nothing to repor | t for any | y line, w | vrite \$0 in | the spa | ice. Include | e your non-filir | ng spouse |
| | u or your non-filing spouse have more ce, attach a separate sheet to this form | | bine the information for a | all emplo | oyers fo | or that per | rson on t | the lines be | elow. If you ne | ed more |
| | | | | | F | or Debto | or 1 | | otor 2 or ng spouse | |
| 2. | List monthly gross wages, salar deductions). If not paid monthly, ca | | | 2. | \$ | 11,15 | 59.87 | \$ | N/A | - |
| 3. | Estimate and list monthly overti | me pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | 1 |
| 4. | Calculate gross Income. Add line | e 2 + line 3. | | 4. | \$ | 11 159 | 87 | S | N/A | 1 |

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| Debtor | Mora, Jose | _ | Case | number (if known) | | |
|---------------|---|-------------|----------------|-------------------|---------------|-------------------------------------|
| | | | | | | |
| | | | For | Debtor 1 | | btor 2 or |
| • | opy line 4 here | 4. | \$ | 44.450.07 | non-fil | ing spouse |
| C | opy line 4 nere | 4. | Ψ_ | 11,159.87 | Ψ | <u>N/A</u> |
| 5. L | ist all payroll deductions: | | | | | |
| 5 | a. Tax, Medicare, and Social Security deductions | 5a. | \$ | 2,573.16 | \$ | N/A |
| 51 | b. Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | N/A |
| 50 | c. Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A |
| 5 | d. Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A |
| 56 | e. Insurance | 5e. | \$_ | 39.23 | \$ | N/A |
| 51 | f. Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A |
| 5 | g. Union dues | 5g. | \$_ | 12.38 | \$ | N/A |
| 51 | h. Other deductions. Specify: Andio Credit Union | 5h.+ | + \$ | 61.92 | + \$ | N/A |
| | Credit Unon | _ | \$_ | 247.61 | \$ | N/A |
| | United | | \$ | 1.91 | \$ | N/A |
| | Ucredi | | \$ | 12.39 | \$ | N/A |
| | safty shoes | | \$ | 6.33 | \$ | N/A |
| | Cash Bonue | | \$ | 12.39 | \$ | N/A |
| | Et | | \$ | 37.14 | \$ | N/A |
| | E>I>P> hr | _ | \$ | 148.59 | \$ | N/A |
| | EIP hourly | | \$ | 111.41 | \$ | N/A |
| 6. A | dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 3,264.46 | \$ | N/A |
| 7. C | alculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 7,895.41 | \$ | N/A |
| 8. L i | ist all other income regularly received: | | | | | |
| 88 | | | | | | |
| | profession, or farm | | | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | |
| | monthly net income. | 8a. | \$ | 0.00 | \$ | N/A |
| 81 | • | 8b. | <u> </u> | 0.00 | \$ | N/A |
| 80 | c. Family support payments that you, a non-filing spouse, or a dependent | : | · - | | · | |
| | regularly receive | | | | | |
| | Include alimony, spousal support, child support, maintenance, divorce | • | • | | • | |
| 0 | settlement, and property settlement. | 8c. | \$_ | 0.00 | \$ | N/A |
| | d. Unemployment compensation | 8d. | \$_ | 0.00 | \$ | N/A |
| 86 | • | 8e. | \$ | 0.00 | \$ | N/A |
| 81 | f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance | | | | | |
| | that you receive, such as food stamps (benefits under the Supplemental | | | | | |
| | Nutrition Assistance Program) or housing subsidies. | | | | | |
| | Specify: | 8f. | \$ | 0.00 | \$ | N/A |
| 89 | | 8g. | \$_ | 0.00 | \$ | N/A |
| 81 | h. Other monthly income. Specify: | 8h.⊣ | + \$_ | 0.00 | + \$ | N/A |
| | | • | | | | |
| 9. A | dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A |
| | | Г | | | | |
| | alculate monthly income. Add line 7 + line 9. | 10. \$ | | 7,895.41 + \$ | | N/A = \$7,895.41 |
| Α | dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | L | | | | |
| 11. S | tate all other regular contributions to the expenses that you list in Schedule | J. | | | | |
| | iclude contributions from an unmarried partner, members of your household, your d | epender | nts, you | ır roommates, an | d | |
| | ther friends or relatives. o not include any amounts already included in lines 2-10 or amounts that are not av | roilabla t | 0 001/0 | vnanaga liatad in | Cahadula | . 1 |
| _ | o not include any amounts already included in lines 2-10 of amounts that are not av pecify: | allable to | o pay e | xpenses listed in | Scriedule | - J. 11. + \$ 0.00 |
| Ü | | | | | | 0.00 |
| 12. A | dd the amount in the last column of line 10 to the amount in line 11. The res | ult is the | comb | ined monthly inc | ome. | |
| V | rite that amount on the Summary of Schedules and Statistical Summary of Certain | า Liabiliti | es and | Related Data, if | t applies | 12. \$ 7,895.41 |
| | | | | | | Combined |
| | | | | | | monthly income |
| 13. D | o you expect an increase or decrease within the year after you file this form | ? | | | | • |
| | No. | | | | | |
| |] Yes. Explain: | | | | | |

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| Fill | n this information to identify yo | ur case: | | | | |
|---------------|---|--|---|-----------------|----------------------|-------------------------------|
| Deb | tor 1 Jose Mora | | | Chec | k if this is: | |
| | oose mora | | | | An amended filing | |
| Deb | ··· | | | | | ing postpetition chapter 13 |
| (Spc | ouse, if filing) | | | , | expenses as of the t | ollowing date: |
| Unit | ed States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLING | OIS, | | MM / DD / YYYY | |
| 1 | e number nown) | | | | | |
| | ficial Form 106J | | | | | |
| | chedule J: Your E | | | | | 12/1 |
| info (if k | rmation. If more space is nee nown). Answer every questic | | | | | |
| Par 1. | 1: Describe Your Housel Is this a joint case? | nold | | | | |
| | ■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in | a a sanarata housahold? | | | | |
| | □ No | i a separate nousenoiu: | | | | |
| | = ::- | t file Official Form 106J-2, Expenses t | for Separate Househo | old of Debtor | 2. | |
| 2. | Do you have dependents? | □ No | | | | |
| | Do not list Debtor 1 and Debtor 2. | ■ Yes. Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | | □ No |
| | dependents names. | | Daughter | | 16 | Yes |
| | | | _ | | | □ No |
| | | | Son | | 14 | Yes |
| | | | D. Harr | | 4.4 | □ No |
| | | | Daughter | | | ■ Yes |
| | | | \A/IEE | | 20 | □ No ■ |
| 3. | Do your expenses include | - | WIFE | | 38 | Yes |
| ა. | Do your expenses include expenses of people other th yourself and your depender | | | | | |
| Par | | | | | | |
| exp | | ur bankruptcy filing date unless yo ankruptcy is filed. If this is a supple | | | | |
| امدا | udo ovnoncoo noid for with | on-oach government conintence if | you know the | | | |
| valu | | on-cash government assistance if ye included it on Schedule I: Your I | | | Your expe | enses |
| | | | | | | |
| 4. | The rental or home ownersh payments and any rent for the | nip expenses for your residence. In ground or lot. | clude first mortgage | 4. \$ | | 2,501.00 |
| | If not included in line 4: | | | | | |
| | 4a. Real estate taxes | | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's, | | | 4b. \$ | | 134.00 |
| | | pair, and upkeep expenses on or condominium dues | | 4c. \$ | | 160.00 |
| 5. | | on or condominium dues nts for your residence, such as hom | ne equity loans | 4d. \$ 5. \$ | | 0.00 |

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| Debtor 1 | Mora, Jo | ese | Case num | ber (if known) | |
|----------------------------------|---|---|---------------|----------------|--------------------------|
| 6. Utili | ties: | | | | |
| 6a. | | heat, natural gas | 6a. | \$ | 370.00 |
| 6b. | • | ver, garbage collection | 6b. | · | |
| | | | | · - | 120.00 |
| 6c. | • | e, cell phone, Internet, satellite, and cable services | 6c. | · | 428.00 |
| 6d. | Other. Spe | _ · | 6d. | | 0.00 |
| . Foo | d and house | ekeeping supplies | 7. | \$ | 1,200.00 |
| . Chil | dcare and c | hildren's education costs | 8. | \$ | 0.00 |
| . Clot | hing, laundi | ry, and dry cleaning | 9. | \$ | 450.00 |
| 0. Pers | sonal care p | roducts and services | 10. | \$ | 0.00 |
| | • | ntal expenses | 11. | | 220.00 |
| | | Include gas, maintenance, bus or train fare. | | | 220.00 |
| | not include ca | | 12. | \$ | 480.00 |
| | | clubs, recreation, newspapers, magazines, and books | 13. | | 450.00 |
| | | ributions and religious donations | 14. | | 40.00 |
| | | ibutions and religious donations | 14. | Ψ | 40.00 |
| 5. Insu | | aurance deducted from your new or included in lines 4 or 20 | | | |
| | | surance deducted from your pay or included in lines 4 or 20. | 150 | ¢ | 0.00 |
| | Life insura | | 15a. | · | 0.00 |
| | . Health ins | | 15b. | · | 0.00 |
| 15c. | Vehicle ins | surance | 15c. | · | 124.99 |
| 15d. | . Other insu | rance. Specify: | 15d. | \$ | 0.00 |
| 6. Tax | es. Do not in | clude taxes deducted from your pay or included in lines 4 or 20. | | | |
| Spe | cify: | | 16. | \$ | 0.00 |
| 7. Insta | allment or le | ease payments: | | | |
| | | ents for Vehicle 1 | 17a. | \$ | 0.00 |
| | | ents for Vehicle 2 | 17b. | \$ | 0.00 |
| | Other. Spe | | 17c. | \$ | 0.00 |
| | Other. Spe | · | —— 17d. | · | 0.00 |
| | • | , | 17u. | Ψ | 0.00 |
| | | of alimony, maintenance, and support that you did not report as your pay on line 5, Schedule I, Your Income (Official Form 106l). | 18. | \$ | 0.00 |
| | | s you make to support others who do not live with you. | | \$ | 0.00 |
| | | you make to support others who do not live with you. | 19. | Ψ | 0.00 |
| Spe | | erty expenses not included in lines 4 or 5 of this form or on Scheo | | ır Incomo | |
| | | on other property | 20a. | | 0.00 |
| | | | | · - | |
| | . Real estate | | 20b. | · | 0.00 |
| | | nomeowner's, or renter's insurance | 20c. | | 0.00 |
| 20d. | . Maintenan | ce, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 20e. | Homeowne | er's association or condominium dues | 20e. | \$ | 0.00 |
| 1. Oth | er: Specify: | | 21. | +\$ | 0.00 |
| | | - <u>-</u> | | | |
| | • | monthly expenses | | | |
| | . Add lines 4 | <u> </u> | | \$ | 6,677.99 |
| 22b. | Copy line 2 | 2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 22c | Add line 22s | a and 22b. The result is your monthly expenses. | | s | 6,677.99 |
| | | | | | |
| | • | monthly net income. | | | |
| 23a. | Copy line | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 7,895.41 |
| 23b. | . Copy your | monthly expenses from line 22c above. | 23b. | -\$ | 6,677.99 |
| | | | | | |
| 23c. | Subtract v | our monthly expenses from your monthly income. | | 1 | |
| | | | 23c. | \$ | 1,217.42 |
| | o roodit | , | | | |
| | | n increase or decrease in your expenses within the year after you | | | |
| For e | example, do yo | ou expect to finish paying for your car loan within the year or do you expect you | | | or decrease because of a |
| | | terms of your mortgage? | | | |
| | No. | | | | |
| | | Explain here: | | | - |
| 24. Do y For e modi | The result you expect a example, do you fication to the No. | ou expect to finish paying for your car loan within the year or do you expect you | u file this f | orm? | · |

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| Fill in this inform | nation to identify your o | case: | | | | |
|---------------------------------------|---|---|-----------------------------|-------------------------|---|-------|
| Debtor 1 | Jose Mora | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN | DIVISION | | |
| Case number | | | | | ☐ Check if this is amended filing | an |
| Official Form | | | | | | |
| Declarat | ion About a | ın Individual | Debtor's So | chedules | | 12/15 |
| obtaining money years, or both. 18 | | e bankruptcy schedules on connection with a bankrife, and 3571. | | | | |
| Did you pay | or agree to pay some | one who is NOT an attorn | ney to help you fill out ba | ankruptcy forms? | | |
| ■ No | | | | | | |
| ☐ Yes. N | ame of person | | | | ruptcy Petition Preparer's N and Signature (Official For | |
| | ty of perjury, I declare t true and correct. | that I have read the sumn | nary and schedules filed | with this declaration a | and | |
| X /s/ Jose M Jose M Signature | | | X Signature of | Debtor 2 | | |

Date ____

Date December 4, 2017

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| | | Document | Page 54 of 66 | |
|---|-------------------------|-------------------------|---------------------------|-----------------------|
| Fill in this inform | mation to identify your | case: | | |
| Debtor 1 | Jose Mora | | | |
| | First Name | Middle Name | Last Name | -) |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT OF IL | LLINOIS, EASTERN DIVISION | |
| Case number (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Par | t 1: Summarize Your Assets | | |
|-----|---|------------|---------------------------|
| | | | assets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 10,191.30 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 10,191.30 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | liabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 245,000.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F | \$ | 57,036.02 |
| | Your total liabilities | \$ | 302,036.02 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I | \$ | 7,895.41 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 6,677.99 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other. | er sched | ules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159. | rsonal, fa | amily, or household |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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Page 55 of 66 Case number (if known) Debtor 1 Mora, Jose

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. \$ 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

12,776.82

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | 1 |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| | | rmation to identify your | case: | | | | | | |
|--------------------|-----------------|--|--|---|--|---|--|--|--|
| Del | otor 1 | Jose Mora First Name | Middle Name | Last Name | | | | | |
| | otor 2 | | | | | | | | |
| (Spc | use if, filing) | First Name | Middle Name | Last Name | | | | | |
| Uni | ted States E | ankruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS, EASTERN DIV | SION | | | | |
| | se number | | | | - | heck if this is an | | | |
| Sta | atemen | and accurate as possib | | e filing together, both are e | ankruptcy qually responsible for supply additional pages, write your r | | | | |
| • | | wer every question. | rital Ctatus and When Var | Lived Defens | | | | | |
| 12a1 | | ur current marital statu | rital Status and Where You | Lived Before | | | | | |
| •• | _ | ar ourrent maritar stata | J. | | | | | | |
| | ■ Marrie | | | | | | | | |
| 2. | During the | uring the last 3 years, have you lived anywhere other than where you live now? | | | | | | | |
| | ■ No □ Yes. L | ist all of the places you liv | ved in the last 3 years. Do not i | nclude where you live now. | | | | | |
| | Debtor 1 I | Prior Address: | Dates Debtor 1 there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | |
| 3. state | | | | | y property state or territory? o, Texas, Washington and Wis | | | | |
| | ☐ Yes. N | Make sure you fill out Scho | edule H: Your Codebtors (Offic | cial Form 106H). | | | | | |
| Par | t 2 Expl | ain the Sources of You | rIncome | | | | | | |
| 4. | Fill in the to | otal amount of income you | nployment or from operating u received from all jobs and a lave income that you receive to | II businesses, including part- | | ar years? | | | |
| | □ No ■ Yes. F | Fill in the details. | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | |
| | | 1 of current year until led for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$140,845.00 | ☐ Wages, commissions, bonuses, tips | | | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | | | |

Case 17-36049 Doc 1 Filed 12/04/17 Entered 12/04/17 16:03:49 Desc Main Document Page 57 of 66 ase number (if known) Debtor 1 Mora, Jose Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$103,103.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$99,783.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of

which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☐ Yes. List all payments to an insider.

Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe paid

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Document Page 58 of 66 Debtor 1 ase number (if known) Mora, Jose Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider **Insider's Name and Address** Reason for this payment Dates of payment Total amount Amount you still owe paid Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. п **Creditor Name and Address** Describe the Property Value of the Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per Describe the gifts Dates you gave Value person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)

Describe what you contributed

Dates you contributed Value

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Case 17-36049 Doc 1 Filed 12/04/17 Entered 12/04/17 16:03:49 Desc Main Page 59 of 66 Document ase number (if known) Debtor 1 Mora, Jose or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Amount of Description and value of any property Date payment or **Address** transferred transfer was payment Email or website address made Person Who Made the Payment, if Not You 3300.00 Law Office Steven A Leahy, PC \$0.00 150 North Michigan Ave Suite 1120 Chicago, IL 60601 Michael S Gabinski \$4,000.00 18W140 Butterfield Rd Ste 1500 Oakbrook Terrace, IL 60181-4854 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment or Amount of Address transferred transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. П Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was payments received or debts Address property transferred made paid in exchange Person's relationship to you

Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Description and value of the property transferred

Date Transfer was

made

Yes. Fill in the details.

Name of trust

beneficiary? (These are often called asset-protection devices.)

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| Pai | 18: List of Certain Financial Accounts, Inst | ruments, Safe Deposit | Boxes, and Stor | age Units | | | |
|-----|---|---|---|---|---------------------------|---|--|
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes, Fill in the details. | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of Type of account number instrument | | unt or Date account was closed, sold, moved, or transferred | | Last balance before closing or transfer | |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables? | ear before you filed for | bankruptcy, any | safe depo | osit box or other deposi | tory for securities, | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S and ZIP Code) | | Describe | the contents | Do you still have it? | |
| 22. | Have you stored property in a storage unit or | place other than your | home within 1 y | ear before | you filed for bankruptc | y? | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | to it? | to it? Address (Number, Street, City, State | | the contents | Do you still have it? | |
| Pai | 9: Identify Property You Hold or Control f | or Someone Else | | | | | |
| 23. | Do you hold or control any property that som someone. | eone else owns? Inclu | de any property | you borro | owed from, are storing fo | or, or hold in trust for | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe | the property | Value | |
| Pai | 10: Give Details About Environmental Infor | mation | | | | | |
| For | he purpose of Part 10, the following definition | ns apply: | | | | | |
| | Environmental law means any federal, state, toxic substances, wastes, or material into the controlling the cleanup of these substances, | air, land, soil, surface | | | | | |
| | Site means any location, facility, or property own, operate, or utilize it, including disposal | | nvironmental lav | w, whether | you now own, operate, | or utilize it or used to | |
| | Hazardous material means anything an environmeterial, pollutant, contaminant, or similar te | | s a hazardous w | aste, haza | rdous substance, toxic | substance, hazardous | |
| Rep | ort all notices, releases, and proceedings that | you know about, regar | dless of when th | ney occurr | ed. | | |
| 24. | Has any governmental unit notified you that y | ou may be liable or po | tentially liable u | nder or in | violation of an environ | mental law? | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | | | | | | |

Case 17-36049 Doc 1 Filed 12/04/17 Entered 12/04/17 16:03:49 Desc Main Document Page 61 of 66 ase number (if known) Debtor 1 Mora, Jose 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Environmental law, if you Date of notice Name of site Governmental unit Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jose Mora Signature of Debtor 2 Jose Mora Signature of Debtor 1 Date December 4, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Official Form 107

☐ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|---|
| \$245 | filing fee | - |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| · | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-36049 Doc 1 Filed 12/04/17 Entered 12/04/17 16:03:49 Desc Main Document Page 66 of 66

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | Mora, Jose | | Case No. | | | | |
|----------|--|--|------------------------|----------------------------|------------|--|--|
| | | Debtor(s) | Chapter | 13 | | | |
| | DISCLOSURE OF COMP | ENSATION OF ATTO | RNEY FOR D | EBTOR | | | |
| C | tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the filterendered on behalf of the debtor(s) in contemplation | ing of the petition in bankruptcy | , or agreed to be paid | d to me, for services rend | ered or to | | |
| | For legal services, I have agreed to accept | | \$ | 4,000.00 | | | |
| | Prior to the filing of this statement I have received | 1 | \$ | 1,000.00 | | | |
| | Balance Due | | \$ | 3,000.00 | | | |
| 2. T | The source of the compensation paid to me was: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 3. T | The source of compensation to be paid to me is: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 4. ■ | I have not agreed to share the above-disclosed comfirm. | pensation with any other person | unless they are men | nbers and associates of m | y law | | |
| | ☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na | | | | firm. A | | |
| 5. I | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | | |
| b. c. | Analysis of the debtor's financial situation, and reno Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credi [Other provisions as needed] | tement of affairs and plan which | h may be required; | | etcy; | | |
| 6. B | by agreement with the debtor(s), the above-disclosed for Adversary Actions | ee does not include the followin | g service: | | | | |
| | | CERTIFICATION | | | | | |
| | certify that the foregoing is a complete statement of a unkruptcy proceeding. | ny agreement or arrangement fo | or payment to me for | representation of the debt | or(s) in | | |
| De | ecember 4, 2017 | /s/ Steven Leahy | | | | | |
| Da | | Steven Leahy Signature of Attorne Law Office Steve | | | | | |
| | | Chicago, IL 6060 (312) 664-6649 F | ax: (312) 803-210 | | | | |
| | | cincompass@it-land | awyer.com | | | | |